Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 1 of 15

Fill in this information to identify your case:	z oode
United States Bankruptcy Court for the:	
District of New Jersey Case number (If known): 19-27238-ABA	_ Chapter you are filing under: _ Chapter 7 _ Chapter 11 _ Chapter 12 ☑ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Steven First name D. Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Owens Last name Sr. Suffix (Sr., Jr., II, III)	Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Steven D. Owens	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer	xxx - xx - <u>8</u> <u>1</u> <u>4</u> <u>0</u>	xxx - xx
	Identification number (ITIN)	9 xx - xx	9 xx - xx

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 2 of 15

Debtor 1 Steven

Steven D. Owens Sr.

First Name Middle

Middle Name Last Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in	✓ I have not used any business names or EINs.	I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		31 Lawrence Rd.	
		Number Street	Number Street
		Bridgeton NJ 08302-4601	
		City State ZIP Code SALEM	City State ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: V Over the last 180 days before filing this petition, I	Check one: Over the last 180 days before filing this petition, I
	bannaptoy .	have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		I have another reason. Explain.	I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 3 of 15

Debtor 1 Steven D. Owens Sr.

First Name Middle Name

Last Name

Pa	art 2: Tell the Court Al	bout Your Bar	nkruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under		otcy (Form 2010)). Als er 7 er 11 er 12	on of each, see <i>Notice Rec</i> o, go to the top of page 1		U.S.C. § 342(b) for Individuals Filing e appropriate box.
8.	How you will pay the fe	local c yourse submit with a I need Applica I requesting By law less the	ourt for more details elf, you may pay with ting your payment of pre-printed address to pay the fee in in ation for Individuals est that my fee be y, a judge may, but if an 150% of the office efee in installments	s about how you may pen cash, cashier's check on your behalf, your attorn. Installments. If you chook to Pay The Filing Fee in waived (You may requise not required to, waive cial poverty line that apprent in the cash of t	ay. Typicall, or money priney may properties of this option of the typical states of typical state	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the nts (Official Form 103A). Ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	District			When	Case number Case number Case number
10.	affiliate?	Pebtor			R	Relationship to you Case number, if known elationship to you Case number, if known
11.	Do you rent your residence?	=	No. Go to line 12.			<i>Against You</i> (Form 101A) and file it with

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 4 of 15

Debtor 1 Steven D. Owens Sr.

First Name Middle Name

Last Name

Pa	rt 3: Report About Any E	Businesses You Own as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	✓ No. Go to Part 4. ☐ Yes. Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name of business, if any Number Street
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	City State ZIP Code
		Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankrupcy Code, and I choose to proceed under Subchatper V of Chapter 11.
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	✓No Yes. What is the hazard? If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	Where is the property?

Debtor 1 Steven D. Owens Sr.

First Name Middle Name

Last Name

Case number (# known) 19-27238-ABA

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

<i>)</i>	S to neceive a bii	eiling About Credit Counselling					
	About Debtor 1:			About Debtor 2 (Sp	oouse Only in a Joint Case):		
	You must check one	e:		You must check one	e:		
lit	counseling age	efing from an approved credit ency within the 180 days before I uptcy petition, and I received a empletion.		counseling age	efing from an approved credit ency within the 180 days before I uptcy petition, and I received a empletion.		
r		the certificate and the payment you developed with the agency.			the certificate and the payment you developed with the agency.		
	counseling age	efing from an approved credit ency within the 180 days before I uptcy petition, but I do not have a empletion.		counseling age	efing from an approved credit ency within the 180 days before I uptcy petition, but I do not have a empletion.		
		after you file this bankruptcy petition, copy of the certificate and payment			after you file this bankruptcy petition, copy of the certificate and payment		
S	services from a unable to obtai days after I ma	sked for credit counseling in approved agency, but was in those services during the 7 de my request, and exigent merit a 30-day temporary waiver tent.		services from a unable to obtai days after I made	sked for credit counseling an approved agency, but was in those services during the 7 de my request, and exigent merit a 30-day temporary waiver tent.		
	requirement, att what efforts you you were unable	day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why to obtain it before you filed for what exigent circumstances file this case.		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			
	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.			
	still receive a bri You must file a c agency, along w	tisfied with your reasons, you must efing within 30 days after you file. certificate from the approved ith a copy of the payment plan you y. If you do not do so, your case ed.		If the court is satisfied with your reasons, you mus still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.			
		f the 30-day deadline is granted nd is limited to a maximum of 15		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.			
	I am not require credit counseli	ed to receive a briefing about ng because of:		I am not require credit counseli	ed to receive a briefing about ng because of:		
	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		
	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		
	Active duty	. I am currently on active military duty in a military combat zone.		Active duty.	. I am currently on active military duty in a military combat zone.		
	briefing about cr	u are not required to receive a edit counseling, you must file a er of credit counseling with the court.		briefing about cr	ou are not required to receive a redit counseling, you must file a er of credit counseling with the court.		

Desc Main AMENDED Filed 12/14/20 Entered 12/14/20 18:59:17 Document Page 6 of 15 Case 19-27238-ABA Doc 33 Document

Steven D. Owens Sr. Debtor 1

First Name	Middle Name

Last Name

Pa	rt 6: Answer These Ques	stions for Reporting Purposes					
-	What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ☑ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 					
17.	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		. Do you estimate that after	any exempt property is excluded an ailable to distribute to unsecured cre			
18.	How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,00	00		
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 m	on \$1,000,000,001-\$ lion \$10,000,000,001	\$10 billion -\$50 billion		
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 m	on \$1,000,000,001-\$ lion \$10,000,000,001	\$10 billion -\$50 billion		
Pa	rt 7: Sign Below						
For you I have examined this petition, and I declare under penalty of perjury that the information provided correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter of title 11, United States Code. I understand the relief available under each chapter, and I choose under Chapter 7.					, 11,12, or 13		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		/s/ Steven D. Owens Sr.	×	, 			
		Signature of Debtor 1		Signature of Debtor 2			
		Executed on Executed on					

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 7 of 15

Debtor 1 Steven D. Owens Sr.

First Name Middle Name

Last Name

Case number (if known) 19-27238-ABA

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Victor Druziako	Date	12/14/2020
Signature of Attorney for Debtor		MM / DD /YYYY
Victor Druziako		
Printed name		
Victor Druziako		
Firm name		
1882 W Landis Ave.		
Number Street		
Vineland	NJ	08360
City	State	ZIP Code
Contact phone 8566927474	Email address vdruz	iako@aol.com
VD-3263	NJ	
Bar number	State	_

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 8 of 15

				1		
Fill in this information to identify	your case:					
Steven D. Owe						
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	District of New Jersey					
Case number19-27238-ABA	1	,		Check if t	his is:	
(If known)					nended filing	
				A sup	olement showing postpetition chapter e as of the following date:	13
Official Form 106I					DD / YYYY	
Schedule I: You	ır Income				12/15	5
supplying correct information. If yo	ou are married and not fili use is not filing with you, top of any additional pag	ing jointly, and you do not include info	ur spouse ormation a	is living with yabout your spo	or 2), both are equally responsible for you, include information about your spo use. If more space is needed, attach a known). Answer every question.	ouse.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse	
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	ed		Employed Not employed	
Include part-time, seasonal, or self-employed work.		Service Tec				
Occupation may include student or homemaker, if it applies.	Occupation	Advanced A				
or nomemaker, in it applies.	Employer's name		,			
	Employer's address	105 Hurffvill	le-Grenic	och Bd		
		Number Street			Number Street	
		Sewell, NJ (
		City		IP Code	City State ZIP Code	
	How long employed the	ere? 3 1/2 years				
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of	the date you file this form	n. If you have nothi	ng to repor	t for any line, w	rite \$0 in the space. Include your non-filing	9
spouse unless you are separated If you or your non-filing spouse he below. If you need more space, a	ave more than one employe		rmation for	all employers f	or that person on the lines	
below. If you fleed filore space, a	ttacii a separate sheet to ti	113 101111.		an Dahtan 4	Fan Dahtan Q an	
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sal deductions). If not paid monthly,			2. _{\$}	3,813.33	<u> </u>	
3. Estimate and list monthly over	rtime pay.		Ψ_ 3. + <u>\$</u>	2,288.00	+ s	
			- Ψ_		·	
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$	6,101.33	\$	

Official Form 106l Schedule I: Your Income page 1

Debtor 1

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Steven D. Owens Sr. Document Page 9 of 45e number (if known) 19-27238-ABA

			For Debt	or 1		Debtor 2 or -filing spouse)		
	Copy line 4 here	→ 4.	\$ 6,10	1.33	\$				
	ist all payroll deductions:		-						
	5a. Tax, Medicare, and Social Security deductions	5a.	_{\$} 1,62	9.33	\$				
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$		_		
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$.				
	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$				
	5e. Insurance	5e.	\$	0.00	\$.				
	5f. Domestic support obligations	5f.	Ψ	0.00	\$.				
	5g. Union dues	5g.	\$	0.00	\$.				
	5h. Other deductions. Specify:	5h.	+\$	0.00	+ \$		_		
			\$		\$		_		
			\$		\$		_		
			\$		\$		-		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	_{\$1,62}		\$		_		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_4,47	2.00	\$		-		
_	List all ather to come constant or a list								
8.	List all other income regularly received:								
	8a. Net income from rental property and from operating a business, profession, or farm								
	Attach a statement for each property and business showing gross								
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$.				
	8b. Interest and dividends	8b.	\$	0.00	\$.				
	8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent							
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	Ф	0.00	\$				
	8d. Unemployment compensation	8d.	Ψ	0.00	\$.				
	8e. Social Security	8e.	\$	0.00	\$.				
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce							
	Specify:	8f.	\$	0.00	\$				
	8g. Pension or retirement income	8g.	\$	0.00	\$				
	8h. Other monthly income. Specify: Debtor's fiance's unemployment benefits.	8h.	+ \$ 2,78	2.00	+\$				
a	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	¢ 2,78	2.00	\$		一		
٥.	That an early meeting, at imposts of the early of the ear	٠.	Ψ				릭		
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_7,25	4.00	+ \$]=	_{\$7,2}	54.00
11.	State all other regular contributions to the expenses that you list in Sche	dule	<i>I</i> .						
	Include contributions from an unmarried partner, members of your household, friends or relatives.	•	,	•					
	Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pa	y expen	ses liste			_	0.00
	Specify:						11. +	\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				-		12.	_{\$} 7,2	54.00
	Trine that amount on the Commany of Tour Assets and Liabilities and Certain	Jialisl	ioai iiiiOiiiiali	, II IL C	4hhiica		ļ	Combine	
13	Do you expect an increase or decrease within the year after you file this	form?	,					monthly	income
10.	□ No. Debtor's fiance is suffering from Covid-19 and			le to w	ork. He	er income co	onsist:	s of	
	Yes. Explain: unemployment benefits. She hopes to get well								

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 10 of 15

		Docu	mem	raye 10	01 13		
Fill in this i	nformation to identify y	our case:					
Dillina	Steven D. Owens Sr.						
Debtor 1	First Name	Middle Name	Last Name		Check if this is:		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		An amended	d filing	
		District of New Jersey					petition chapter 13
	19-27238-ABA	,	(S	State)	expenses as	s of the following	date:
Case number (If known)					MM / DD / YY	YY	
Official I	Form 106J						
Sched	lule J: You	ır Expense	S				12/15
information. (if known). A	If more space is neede nswer every question.	ssible. If two married pe d, attach another sheet					
Part 1:	Describe Your House	sehold					
1. Is this a joi	int case?						
☑ No. Go	to line 2.						
Yes. Do	oes Debtor 2 live in a s	eparate household?					
	No Yes. Debtor 2 must file	official Form 106J-2, <i>Ex</i>	penses for S	eparate House	ehold of Debtor 2.		
2. Do you ha	ve dependents?	☐ No					
-	Debtor 1 and	Yes. Fill out this info		Debtor 1 or D	relationship to ebtor 2	Dependent's age	Does dependent live with you?
Do not state	e the dependents'	·		Fiance's	friend	61	□ No ☑Yes
names.							
							□No □Yes
							No
							Yes
							No
							Yes
							₩No
							Yes
expenses	penses include of people other than nd your dependents?	✓ No ☐ Yes					
		ng Monthly Expenses					
-	of a date after the bank	bankruptcy filing date u kruptcy is filed. If this is	-	_	• •	•	-
-	•	-cash government assis it on <i>Schedule I: Your I</i>	-			Your expen	nses
4. The renta		xpenses for your reside				. \$	1,560.78

If not included in line 4: 0.00 Real estate taxes 4a. 0.00 Property, homeowner's, or renter's insurance 4b. 4b. 0.00 Home maintenance, repair, and upkeep expenses 4c. 4c. 0.00 Homeowner's association or condominium dues 4d. 4d.

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 11 of 15

Debtor 1

Steven D. Owens Sr.

First Name Middle Name Last Name

			Your ex	penses		
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	438.58		
	Utilities:					
0.	6a. Electricity, heat, natural gas	6a.	\$	800.00		
	6b. Water, sewer, garbage collection	6b.	\$	0.00		
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$			
	6d. Other Specify:	6d.	\$	0.00		
7.	Food and housekeeping supplies	7.	\$	800.00		
3.	Childcare and children's education costs	8.	\$	0.00		
9.	Clothing, laundry, and dry cleaning	9.	\$	75.00		
).	Personal care products and services	10.	\$	105.00		
۱.	Medical and dental expenses	11.	\$	140.00		
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	160.00		
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	60.00		
4.	Charitable contributions and religious donations	14.	\$	0.00		
5.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.					
	15a. Life insurance	15a.	\$	186.00		
	15b. Health insurance	15b.	\$	0.00		
	15c. Vehicle insurance	15c.	\$	537.63		
	15d. Other insurance. Specify:	15d.	\$	0.00		
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00		
7.	Installment or lease payments:					
	17a. Car payments for Vehicle 1	17a.	\$	458.96		
	17b. Car payments for Vehicle 2	17b.	\$	620.61		
	17c. Other. Specify:	17c.	\$	0.00		
	17d. Other. Specify:	17d.	\$	0.00		
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00		
9.	Other payments you make to support others who do not live with you.					
	Specify:	19.	\$	0.00		
).	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.					
	20a. Mortgages on other property	20a.	\$	0.00		
	20b. Real estate taxes	20b.	\$	0.00		
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00		
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00		
	20e. Homeowner's association or condominium dues	20e.	\$	0.00		

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 12 of 15

Debtor 1	Steven D. Owens Sr. Case number (# k	19-	-27238-ABA	
	First Name Middle Name Last Name			
1. Oth	er. Specify: Storage Unit	21.	+\$	100.00
		۷۱.	+\$	
			+\$	
2. Ca	culate your monthly expenses.			
22a	. Add lines 4 through 21.	22a.	\$	6,697.56
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a	22b.	\$	
and	22b. The result is your monthly expenses.	22c.	\$	6,697.56
os Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,254.00
23b.	Copy your monthly expenses from line 22c above.	23b.	- \$	6,697.56
23c.	Subtract your monthly expenses from your monthly income.		¢	556.44
	The result is your monthly net income.	23c.	Φ	
4. Do y	ou expect an increase or decrease in your expenses within the year after you file this form?			
_	example, do you expect to finish paying for your car loan within the year or do you expect your			
mort	gage payment to increase or decrease because of a modification to the terms of your mortgage?			
V N				
☐ Y	es. Explain here:			

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 13 of 15

Fill in this information to identify your case:				
Debtor 1	Steven D. Owens Sr.			
_	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: District of New Jersey Case number 19-27238-ABA (If known)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>160,169.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>24,659.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>184,828.00</u>
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$254,227.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 495.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ <u>11,613.00</u>
Your total liabilities	\$266,335.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>7,254.00</u>
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	_{\$} 6,697.56

Desc Main AMENDED Case 19-27238-ABA Doc 33 _ Filed 12/14/20 Entered 12/14/20 18:59:17 Page 14 of 15 Document

Steven Owens Sr.

19-27238-ABA

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Pa	art 4: Answer These Questions for Administrative and Statistical Records				
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes				
7.	What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.				
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.				
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim			
	From Part 4 on Schedule E/F, copy the following:				
	9a. Domestic support obligations (Copy line 6a.)	\$			
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$			
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$			
	9d. Student loans. (Copy line 6f.)	\$			
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$			
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$			
	9g. Total. Add lines 9a through 9f.	\$0.00			

Case 19-27238-ABA Doc 33 Filed 12/14/20 Entered 12/14/20 18:59:17 Desc Main AMENDED Document Page 15 of 15

Fill in this information to identify your case:					
Debtor 1	Steven D. O	wens Sr.	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the District of New Jersey					
	19-27238-AE		_		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
— Fee: Name of person	Signature (Official Form 119).
Under penalty of perjury, I declare that I have	read the summary and schedules filed with this declaration and
that they are true and correct.	•
/s/ Steven D. Owens Sr.	×
Signature of Debtor 1	Signature of Debtor 2
_{Date} 12/14/2020	Date
MM / DD / YYYY	MM / DD / YYYY